POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Mr	6764	8/30/00
O.I.P.E. CLASSIFIER	(39	<i>\$10.4</i>	0.7-7
FORMALITY REVIEW	7	JC851	1/3/07
RESPONSE FORMALITY REVIEW			10 -10 -00

INDEX OF CLAIMS

V	Rejected	N	Non-elected
	Allowed		Interference
	(Through numeral) Canceled	Α	Appeal
÷	Restricted	_	Objected

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Claim	Date	Claim	Date	Claim	Date			
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24 37 25 38 26 39		87 88 89		136 137 138				
27 40 V V		90 91 92		140				
		93 94 95		143 144 145				
26/47 25/48 31/49		96 97 98 99 99		146 147 148				
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If more than 150 claims or 10 actions staple additional sheet here

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